Immunization Timing 2023

Birth

HepB¹

RSV²

(age: 0-8 months)

Suggested schedule to meet recommendations on tin	1e. Refer to web version.

6 months – 18+ years	
COVID-19 vaccine(s) ⁶	Flu vaccine, every fall ⁷

Age 2 months	Interval from previous dose
DTaP (Diphtheria, Tetanus, Pertussis)	
Polio (IPV)	
HepB ³ (age: 1-2 months)	1-2 months after birth dose
Hib (Hib menigitis)	
PCV (Pneumo)	
RV ⁴ (Rotavirus)	

Age 4 months	Interval from previous dose
DTaP	1-2 months
Polio (IPV)	1-2 months
HepB ³ if 1st dose given at 2 months	1-2 months
Hib	1-2 months
PCV	1-2 months
RV ⁴	4-10 weeks

Age 6 months	Interval from previous dose
DTaP	1-2 months
Polio age: 6-18 months)	1-14 months
HepB ³ (age: 6-18 months)	2-12 months and ≥4 months after 1st dose
Hib ⁵	1-2 months
PCV	1-2 months
RV ⁴ if RotaTeq used for doses 1 or 2	4-10 weeks

Age 12 months	Interval from previous dose
HepA ⁸ (age: 12-23 months)	
MMR 8,9,10 (ages 12-15 months)	
Var ¹⁰ (age:12-15 months)	
Hib (age: 12-15 months)	2-8 months
PCV ¹¹ (age: 12-15 months)	6-8 weeks
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Age 18 months	Interval from previous dose
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Age 4-6 years	DTaP Polio (IPV) MMR ^{9, 10} Varicella ¹⁰
Age 11-12 years	Tdap HPV ¹³ (2 doses, can start at age 9) MenACWY (MCV4)
Age 16 years	MenACWY (MCV4) MenB ¹⁴



This is a suggested schedule. For alternatives and details, including additional recommendations for high-risk children, consult the Recommended Child and Adolescent Immunization Schedule for ages 18 years or younger, United States, 2023.

- 1. Monovalent HepB vaccine is recommended within 24 hours of birth for stable infants weighing >2 kg. For others, see schedule.
- 2. Infants <8 months entering their first RSV season should receive RSV immunization if birth parent's prenatal RSV vaccination status is: unvaccinated, unknown, or vaccinated <14 days before birth. RSV immunization is also recommended for specified children ages 8-19 months who are at increased risk of severe RSV and entering their 2nd RSV season.
- 3. A dose of HepB vaccine is not necessary at 4 months if doses are given at birth and 2 months but may be included as part of a combination vaccine. The final dose (3RD/4TH) should be given after age 24 wks. and at least 16 wks. after 1st dose.
- 4. Administer first dose at age 6 wks-14 wks. (Max. age: 14 wks., 6 days). Max. age for final dose in the series: 8 months, 0 days. If any dose of RV5 is given or product is unknown, a total of three RV doses are needed.
- 5. This 6 month Hib dose is not indicated if PedvaxHIB® is used exclusively for the 2 and 4 month infant doses.
- 6. See CDC guidelines for doses and intervals for healthy or immunocompromised children.
- 7. Two doses given at least 4 weeks apart are recommended for ages 6 months-8 years who are getting flu vaccine for the first time.
- 8. Refer to CDC guidelines for vaccinating children 6-11 months prior to international travel.
- 9. Min. interval between 1ST and 2ND dose is 4 wks. Two MMR doses should still be given on or after 12 months of age.
- 10. Minimum intervals: Ages 1-12 year: 3 months. Ages 13 years and older: 4 weeks.
 MMRV may be used when both MMR and Varicella vaccines are indicated. For the 1st dose at 12-15 months,
 MMR and varicella vaccines should typically be given unless the parent or caregiver prefers MMRV.
- 11. Final dose of PCV series should be given at ≥12 months of age or after.
- 12. The 4th dose of DTaP may be administered as early as 12 months, provided at least 6 months have elapsed since the 3RD DTaP dose.
- 13. HPV vaccine should be given on a 0, 6-12 month schedule for 9-14 year olds (min. interval is 5 months). If patient immunocompromised or initiates series at 15 years or older, use a 3 dose schedule (0, 1-2, 6 months).
- 14. A MenB vaccine series may be given to all persons 16 through 23 years of age. See MMWR for details.

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